



Your business
is our business.

REDACTED – FOR PUBLIC INSPECTION

7852 Walker Drive, Suite 200
Greenbelt, Maryland 20770
phone: 301-459-7590, fax: 301-577-5575
internet: www.jsitel.com, e-mail: jsi@jsitel.com

October 10, 2013

By Hand Delivery

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

**Re: WC Docket No. 10-90, WC Docket No. 11-42
2013 ETC Annual Report of Oxford County Telephone Company
Study Area Code 100019**

Dear Ms. Dortch:

On behalf of Oxford County Telephone Company “Oxford County”, JSI files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission’s rules.¹ Oxford County seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information.² The redacted version is also being filed this date via the FCC’s Electronic Comment Filing System.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall
JSI Vice President
301-459-7590
jkuykendall@jsitel.com

cc: Charles Tyler, Telecommunications Access Policy Division (two copies, confidential)

¹ 47 C.F.R. §§ 54.313, 54.422.

² *Connect America Fund et al.*, WC Docket No. 10-90 *et al.*, Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order). 47 C.F.R. § 54.313(f)(2).

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code	100019
<015> Study Area Name	OXFORD COUNTY TEL
<020> Program Year	2014
<030> Contact Name: Person USAC should contact with questions about this data	Dawna K. Hannan
<035> Contact Telephone Number: Number of the person identified in data line <030>	207-333-3455
<039> Contact Email Address: Email of the person identified in data line <030>	dhannan@oxfordnetworks.com

ANNUAL REPORTING FOR ALL CARRIERS		54.313 Completion Required	54.422 Completion Required
(check box when complete)			
<100> Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	
<200> Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report			
<300> Unfulfilled Service Requests (voice)		<input checked="" type="checkbox"/>	
<310> Detail on Attempts (voice)	(attach descriptive document)		
<320> Unfulfilled Service Requests (broadband)			
<330> Detail on Attempts (broadband)	(attach descriptive document)		
<400> Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed	0.0		
<420> Mobile			
<430> Number of Complaints per 1,000 customers (broadband)			
<440> Fixed			
<450> Mobile			
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> Compliance with Service Quality	(attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> Emergency Functionality - Oxford	(attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	(complete attached worksheet)		
<710> Company Price Offerings (broadband)	(complete attached worksheet)		
<800> Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)?	(if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	
<1000> Voice Services Rate Comparability	(check to indicate certification)		
<1010> <input type="checkbox"/>	(attach descriptive document)		
<1100> Terrestrial Backhaul (Y/N)?	(if not, check to indicate certification)	<input checked="" type="checkbox"/>	
<1110>	(complete attached worksheet)		
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)		<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	(check to indicate certification)		
<2005>	(complete attached worksheet)		

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>	
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	

(100) Service Quality Improvement Reporting Data Collection Form	
FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	

<010>	Study Area Code	100019
<015>	Study Area Name	OXFORD COUNTY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Dawna K. Hannan
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039>	Contact Email Address - Email Address of person identified in data line <030>	dhannan@oxfordnetworks.com
<110>	Has your company received its ETC certification from the FCC?	(yes / no) <input checked="" type="radio"/>
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113>	Maps detailing progress towards meeting plan targets	<input type="checkbox"/>
<114>	Report how much universal service (USF) support was received	<input type="checkbox"/>
<115>	How (USF) was used to improve service quality	<input type="checkbox"/>
<116>	How (USF) was used to improve service coverage	<input type="checkbox"/>
<117>	How (USF) was used to improve service capacity	<input type="checkbox"/>
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	<input type="checkbox"/>

(200) Service Outage Reporting (Voice)
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	100019
<015>	Study Area Name	OXFORD COUNTY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Dawn K. Hannan
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039>	Contact Email Address - Email Address of person identified in data line <030>	dhannan@oxfordnetworks.com

[illegible]

FCC Form 481
OMB Control No.
July 2013

1/1/2013	
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	Residential Local Service Charge Effective Date	Single State-wide Residential Local Service Charge
<701>		
<702>		

[illegible]

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	100019
<015>	Study Area Name	OXFORD COUNTY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Dawna K. Hannan
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039>	Contact Email Address - Email Address of person identified in data line <030>	dhannan@oxfordnetworks.com

[illegible]

(900) Tribal Lands Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	100019
<015>	Study Area Name	OXFORD COUNTY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Eawia K. Hannan
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039>	Contact Email Address - Email Address of person identified in data line <030>	dhannan@oxfordnetworks.com

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	Select (Yes, No, NA)
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

Name of Attached Document (.pdf)

(1100) No Terrestrial Backhaul Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	100019
<015>	Study Area Name	OXFORD COUNTY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Davina K. Hannan
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039>	Contact Email Address - Email Address of person identified in data line <030>	dhannan@oxfordnetworks.com

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) ☐

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) ☐

(1200) Terms and Condition for Lifeline Customers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
Data Collection Form			
<010>	Study Area Code	100019	
<015>	Study Area Name	OXFORD COUNTY TEL	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Dawna K. Hannan	
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455	
<039>	Contact Email Address - Email Address of person identified in data line <030>	dhannan@oxfordnetworks.com	

FCC - Form #481 - Lifeline Reporting - 54

Name of attached document (.pdf)

HTTP

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

<1220> Link to Public Website

"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒

<1222> Details on the number of minutes provided as part of the plan, ☒

<1223> Additional charges for toll calls, and rates for each such plan. ☒

(2000) Price Cap Carrier Additional Documentation	
Data Collection Form	
<i>Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers</i>	
FCC Form 481	OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013	

<010>	Study Area Code	100019
<015>	Study Area Name	OXFORD COUNTY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Dawn K. Hannan
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039>	Contact Email Address - Email Address of person identified in data line <030>	dhannan@oxfordnetworks.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b)(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

<2010>	Incremental Connect America Phase I reporting	<input type="checkbox"/>
<2011>	2nd Year Certification (47 CFR § 54.313(b)(1))	<input type="checkbox"/>
	3rd Year Certification (47 CFR § 54.313(b)(2))	<input type="checkbox"/>

<2012>	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))	<input type="checkbox"/>
<2013>	2013 Frozen Support Certification	<input type="checkbox"/>
<2014>	2014 Frozen Support Certification	<input type="checkbox"/>
<2015>	2015 Frozen Support Certification	<input type="checkbox"/>
	2016 and future Frozen Support Certification	<input type="checkbox"/>

<2016>	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))	<input type="checkbox"/>
	Certification Support Used to Build Broadband	<input type="checkbox"/>

<2017>	Connect America Phase II Reporting (47 CFR § 54.313(e))	<input type="checkbox"/>
<2018>	3rd year Broadband Service Certification	<input type="checkbox"/>
<2019>	5th year Broadband Service Certification	<input type="checkbox"/>
<2020>	Interim Progress Certification	<input type="checkbox"/>

Please check the box to confirm that the attached PDF, on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation			
Data Collection Form			
FCC Form 481		OMB Control No. 3060-0986/OMB Control No. 3060-0819	
July 2013			
<10> Study Area Code	100019	OXFORD COUNTY TEL	
<15> Study Area Name	2014		
<20> Program Year			
<30> Contact Name - Person USAC should contact regarding this data	Dawna K. Hannan		
<35> Contact Telephone Number - Number of person identified in data line <30>	207-333-3455		
<39> Contact Email Address - Email Address of person identified in data line <30>	dhannan@oxfordteleworks.com		

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

Progress Report on 5 Year Plan	Name of Attached Document Listing Required Information	(Yes/No)
(3010) Milestone Certification (47 CFR § 54.313(f)(1)(i)) Please check this box to confirm that the attached PDF, on line 3012, contains the required information pursuant to § 54.313(f)(1)(i), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.		<input type="checkbox"/>
(3011) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		<input checked="" type="checkbox"/> (Yes/No) <input type="checkbox"/> (Yes/No)
(3012) PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3013) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation		<input type="checkbox"/>
(3014) If the response is no on line 3014, is your company audited?		<input type="checkbox"/>
(3015) If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<input checked="" type="checkbox"/> (Yes/No) <input type="checkbox"/> (Yes/No)
(3016) Management letter issued by the independent certified public accountant that performed the company's financial audit.		<input type="checkbox"/>
(3017) If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers.		<input type="checkbox"/>
(3018) Underlying information subjected to a review by an independent certified public accountant		<input type="checkbox"/>
(3019) Underlying information subjected to an officer certification.		<input type="checkbox"/>
(3020) PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3021) Attach the worksheet listing required information		<input type="checkbox"/>

Oxford Telephone Company - Audited Financials & Audi

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	100019
<015>	Study Area Name	OXFORD COUNTY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Dawna K. Hannan
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039>	Contact Email Address - Email Address of person identified in data line <030>	dhannan@oxfordnetworks.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	OXFORD COUNTY TEL
Signature of Authorized Officer:	CERTIFIED ONLINE Date 10/10/2013
Printed name of Authorized Officer:	Michael Harder
Title or position of Authorized Officer:	CFO
Telephone number of Authorized Officer:	207-333-6900
Study Area Code of Reporting Carrier:	100019 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	100019
<015> Study Area Name	OXFORD COUNTY TEL
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Dawna K. Hannan
<035> Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039> Contact Email Address - Email Address of person identified in data line <030>	dhannan@oxfordnetworks.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

<010>	Study Area Code	100019
<015>	Study Area Name	OXFORD COUNTY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Dawn K. Hannan
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039>	Contact Email Address - Email Address of person identified in data line <030>	dianan@oxfordnetworks.com
<810>	Reporting Carrier	Oxford Telephone Company
<811>	Holding Company	Oxford County Telephone & Telegraph Company
<812>	Operating Company	Oxford Telephone Company

[illegible]

Demonstration of Compliance with Applicable Service Quality Standards and Consumer Protection Rules:

1. FCC Requirements.

Section 54.313(a)(5) of the FCC Rules requires that a recipient of high-cost support shall provide "certification that it is complying with applicable service quality standards and consumer protection rules." In establishing this certification in its *2005 ETC Order*,¹ the FCC found that an ETC must make "a specific commitment to objective measures to protect consumers."² The Commission found that for wireless ETCs, compliance with CTIA's Consumer Code for Wireless Service would satisfy this requirement" and that the sufficiency of other commitments would be considered on a case-by-case basis.³ In this context, the FCC stated, "to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement."⁴

Oxford Telephone Company ("Company") hereby certifies that to the best of the knowledge of its officers responsible for said matters, it is complying with applicable service quality standards and consumer protection rules. The Company is subject to service quality standards as required by 35-A M.R.S.A. §7225, and to the Maine PUC's

¹ *Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) ("*2005 ETC Order*").

² *Id.* at para. 28.

³ *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: "(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy." *Id.* at n. 71.

⁴ *Id.* at n. 72.

Demonstration of Ability to Function in Emergency Situations

1. FCC Requirements.

Section 54.313(a)(6) of the FCC Rules requires that a recipient of high cost support provide "certification that the carrier is able to function in emergency situations as set forth in 54.202(a)(2)." Section 54.202(a)(2) requires ETCs that are designated by the Commission to "demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations."

Oxford Telephone Company, "(Company)" hereby certifies that to the best of the knowledge of its officers responsible for such matters, it is able to function in emergency situations as set forth in §54.202(a)(2). The Company's network is designed to remain functional in emergency situations without an external power source, to reroute traffic around damaged facilities, and to be capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2). The Company network is also designed so that the Company can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will allow the Company to manage traffic spikes throughout its network, as emergency situations require.

Each central office building is supplied with standby generators and battery back-up that are designed to enable the central office to keep running until power is restored so long as fuel is available, or until system changes are made to reroute traffic. The Company has battery backup at all office locations and in its electronic equipment sites.

Length of run time is determined by the equipment serving the area and the number of customers working out of the equipment. Generators are installed at all Central Office locations, and are expected to run as long as the Company has access to fuel.

<010>	Study Area Code	100019
<015>	Study Area Name	OXFORD COUNTY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Dawn K. Hannan
<035>	Contact Telephone Number - Number of person identified in data line <030>	207-333-3455
<039>	Contact Email Address - Email Address of person identified in data line <030>	d.hannan@oxfordnetworks.com
<810>	Reporting Carrier	Oxford Telephone Company
<811>	Holding Company	Oxford County Telephone & Telegraph Company
<812>	Operating Company	Oxford Telephone Company

[illegible]

Product	Description	Code	Monthly Cost	One Time Charges
Lifeline Telephone Service	The Lifeline Service Program provides for a reduction equal to amounts as ordered by the Maine Public Utilities Commission. Monthly Lifeline subsidies will not exceed the cost of monthly access line rate(s) and the FCC and user subscriber line charge. the reduction applies to the monthly rate for one residential basic exchange service line. The reduction in the monthly rate and other Lifeline benefits are provided to qualified residential customers under the FCC Lifeline Assistance program			
General Information	~ This service is restricted to low income residential subscribers. To qualify for the Lifeline Service Program any member of a subscriber's household must be a recipient of benefits from one of the following programs: Medicaid; Supplemental Nutrition Assistance Program (SNAP), formerly known as Food Stamps; Supplemental Security Income (SSI); Federal Public Housing Assistance; Low-Income Home Energy Assistance Program (LIHEAP); National School Lunch Program's free lunch program; and Temporary Assistance for Needy Families (TANF). An applicant is also eligible if they have a household income at or below 135% of the Federal Poverty Guidelines. ~ The company is prohibited against disconnection of Lifeline customers' local service for non-payment of optional and toll charges. ~ The Company has the right to place mandatory toll restriction on Lifeline accounts who fail to make payment of toll charges within a reasonable period of time. ~ Toll Restrictions service will be offered free of charge to Lifeline customers. ~ The Company is prohibited from requiring a Lifeline customer to pay service deposits in order to initiate service even if the subscriber voluntarily elects to receive toll blocking. ~ the Company must apply partial payments received from Lifeline customers first to local charges and then to toll charges. ~ A credit of \$9.00 applies to installing one residential access line for those customers who are eligible for the Lifeline Service Program. This credit also applies for restoration or reconnection of service, for reasons other than temporary suspension of service, at the same location no more than once per customer per year.		\$9.25 Federal Credit \$3.50 State Credit	\$9.00 Installation Credit
Responsibility of the Subscriber	Customers must be certified as eligible by the appropriate State of Maine agency or present satisfactory proof of eligibility to the Company for both the reduced monthly rate and the installation credit. Recertification of eligibility will occur at least once per year. The monthly credit will be removed from customer accounts who are no longer eligible.			
Local Private Line Service	Private Line Telephone Service is the provision of facilities, including channels and station equipment not switched through a central office, to enable a customer to communicate between specified locations. All facilities required for this service are furnished by the Telephone Company on a full-period service basis only. The service equipment and channels provided under this section are not furnished for the commercial transmission of communications between exchanges nor for the use on competition with any form of service rendered by the Telephone Company or its connecting companies. The rates specified herein are applicable where facilities are available and when standard transmission voice grade circuits can be obtained without the use of special equipment. If, for operating reasons, special equipment is required to render satisfactory service, such special equipment shall be charged for in addition to the applicable charges for standard equipment.			
Local Channels (Dry Cable Pair)	Local Channels		\$10.80	
Local Transport Digital Line Service	Channels provided herein are for data transmission only		\$12.00	
Intra Exchange Dark Fiber	Priced on an Individual Case Basis (ICB)		ICB	
Off/On Premise Extension	Off Premise and On Premise Extensions are not in accordance with the general plan of furnishing telephone service are provided only under special conditions when warranted by the circumstances involved and when suitable facilities are and continue to be available. Off premise and On Premise Extensions are furnished when the station telephone is outside the building in which the associated telephone is located. An extension is considered to be off-premise if it leaves the customer's property boundary (i.e. across the road), but within the same exchange. A special equipment charges as approved by the Public Utilities Commission under special contract will be applied for such equipment as may be required at any time for transmission and signaling where a customer requires an off premise station line in connection with access line telephone service. The type of circuit construction and its routing are at all times determined by the Telephone Company and ownership of such circuits shall remain vested in the Company.			
Off Premise Extension	Lines serving Business or Residence where the extension termination is on premises other than the access line termination point, but within the same exchange area		\$5.80 /per loop if same continuous loop \$18.10 / per loop if non-continuous loop	
On Premise Extension	Lines serving Business or Residence where the extension termination is on the same continuous property as the access line termination point but in a separate building		\$3.80 /per loop	

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SERVICE CHARGES

3.1 General

- A. Service Charges apply to services or equipment ordered or connected into service at the Customer's request including initial connections, moves, and restoration of service. Certain items of equipment in this Tariff are listed with an Installation Charge. This Installation Charge is applied in addition to the appropriate Service Charges listed below.
- B. Service charges apply in addition to, but not in lieu of charges which may be incurred in installations of a temporary or speculative nature.
- C. Service charges are comprised of the following work functions, one or more of which is applicable based upon the service or equipment requested by a Customer.
 - 1. Initial Connection Charge - Applicable for work performed by the Telephone Company in connection with the Initial establishment of or restoration of provider of last resort retail service.
 - 2. Secondary Service Order Charge - Applicable for work performed by the Telephone Company in association with connections, moves or changes to an established provider of last resort retail service
 - 3. Telephone Number Change Charge - Applicable for work performed by the Telephone Company in connection with changing telephone numbers at the customer's request
 - 4. Network Interface/Drop Relocation Charge - Applicable for work performed by the Telephone Company for the relocation of the Network Interface device or aerial/buried drop.
 - 5. Additional Line Connection Charge - is applicable for work performed by the Telephone Company in connection with the installation of additional line(s) at the time of initial establishment of service. Applies when a customer is adding more than one access line at a time (Initial Connection Charge of \$38.00 applies for the first line).

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3.2 Rates

		<u>Nonrecurring Charge</u>	
		<u>Business</u>	<u>Residence</u>
A.	Initial Connection Charge	\$38.00	\$38.00
B.	Secondary Service Order Charge	\$ 5.00	\$ 5.00
C.	Telephone Number Change Charge	\$15.00	\$15.00
D.	Network Interface/Drop Relocation Charge	\$20.00	\$20.00.
E.	Additional Line Connection Charge	\$20.00	\$20.00

3.3 Application of Service Charges

- A. The Initial Connection Charge is applicable for requests for:
1. Initial connection of provider of last resort retail service
 2. Transfer of provider of last resort retail service involving a request for a final bill or, if a final bill is not requested, a refusal of the future Customer to accept full responsibility for the former Customer's account.
- B. The Secondary Service Order Charge is applicable for subsequent Customer requests for connections, moves or changes to an established provider of last resort retail service.
- C. The Initial Connection Charge and the secondary service order charge cannot be applied on the same order. When an order requires work for which both the Initial Connection Charge and secondary service order charge would otherwise be applied, only the Initial Connection Charge is applicable.
- D. Discontinuance of Service Charge An Initial Connection Charge will apply for restoration of service following disconnection for nonpayment.

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- E. In the case of equipment for which the initial Contract (termination agreement) period is more than one month at the same location, the Subscriber may arrange for the change of location on the same or to different Premises in the same Exchange area by one of the following methods:
1. By terminating the Contract for service at the old location, and signing a new application. In this case the Subscriber is required to pay the sum of any Termination Charges which may be applicable plus the Installation Charges which would apply in the case of a new installation.
 2. By paying the Cost of making the change in location including the Cost of removing all the equipment from the old locations and the Cost of installing the equipment at the new locations. In this case the Contract period is not affected.

3.4 Exceptions

- A. Service Charges do not apply for the following:
1. Visits to a Customer's Premises solely for the purpose of repair, maintenance or disconnection of Telephone Company provided service and equipment.
 2. Changes from Premium to Economy service or changes from any service other than Provider of Last Resort Retail Service to Provider of Last Resort Retail Service.
 3. Service reestablished after the destruction of the residential Customer's Premises by fire, flood, or other similar causes beyond the Customer's control, where the same amount of service is reestablished within a reasonable period of time at the same or different location. If, under the preceding conditions, service is installed at another location and then subsequently reestablished at the original location, Service Charges will apply for the subsequent installation.

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4. A change of telephone number when initiated by the Company.
5. Any work functions required not due to Customer's request.

- B. To the extent the Commission requires application of a discount to installation charges for customers who have complied with the certification requirements and qualified for Lifeline service pursuant to Part 54 of the Rules of the Federal Communications Commission, Company shall apply such Commission ordered discounts to the installation charges associated with an initial connection of provider of last resort retail service.

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Residential Economy Service

4.1 Eligibility

- A. Residential service rates shall apply if the service is primarily for domestic purposes and the telephone number associated with the service is not included in any form of advertising for any business purpose.
- B. Business rates shall apply for any service that does not qualify for residential service rates as set forth in Section 4.1.A. Customers to whom business rates apply are not eligible to take Residential Economy Service.

4.2 Definitions

- A. Basic Service Calling Area – (BSCA) is the local (non-interexchange) calling area of the “home exchange” of a customer of Oxford Telephone Company. The BSCA includes all exchanges that were in the BSCA prior to the amendments effective in December 2002 plus all exchanges that are contiguous to the home exchange that were not included prior to the December 2002 amendments. Within a BSCA, there may be Economy and Premium calling options with flat-rate and per-minute pricing as specified in the definitions of those options. For all options, the BSCA includes all of the exchanges that are included in the calling option with the largest flat-rate calling area.
- B. Home Exchange – is the Exchange of the Company where the Customer receives dial tone.
- C. Economy Calling Area is the Customer’s basic-service calling area that has a flat monthly rate for unlimited calling within the Customer’ Home Exchange and the list of Exchanges identified in connection with the particular Home Exchange in Section 4.4.A and a per-minute rate for calling to the list of Exchanges identified in connection with the Home exchange in Section 4.4.C of this Tariff.

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Residential Economy Service (cont.)

- D. Provider of last resort service – is a flat-rate service with voice grade access to the public switched telephone network; local usage within the basic service calling areas of incumbent local exchange carriers as of

January 1, 2012; dual-tone multi-frequency signaling or its functional equivalent; single-party service or its functional equivalent; access to emergency services; access to operator services; access to interexchange service; access to directory assistance; toll limitation for qualifying low-income customers; and the capacity to maintain uninterrupted voice service during a power failure, either through the incorporation into the network or network interface devices of suitable battery backup or through electric current. For purposes of this Schedule, all terms included within the definition of provider of last resort service have the same meanings as set forth in 35-A MRSA § 7201.

- E. Residential Economy Service – is provider of last resort service offered to residential customers on a retail basis with the Economy Service Area as the Customer's Basic Service Calling Area.

4.3 Regulations Concerning Residential Economy Service.

- A. Calls Outside the Economy Calling Area – Residential Economy Service customers may make local calls from their Home Exchange to the additional Exchanges included in Section 4.4.C at a per-minute rate. The per-minute rate for such calls is set forth in Section 4.4.D of this Tariff. Calls made from the Home Exchange to locations within the State of Maine, other than those listed in Section 4.4 are billed to the Customer at the applicable intrastate toll rates of the carrier used to provide Customer's intrastate toll service.
- B. Municipal Calling Service – Customer shall receive toll free calling to any other customer of a Provider of Last Resort within the municipality in which Customer resides where practicable so long as Customer is utilizing an intralata toll provider for whom Company provides billing to the Customer. In the event Customer is charged by an intralata toll provider for whom Company provides billing to the Customer for a call to a Provider of Last Resort customer within the municipality in which Customer resides, Company shall remove any charges associated with any such municipal calling from the customer's bill when notified by the customer.
- C. Changes in Calling Areas – The Customer's initial selection of either the Economy Calling Area Service offering or the Premium Calling Area Service offering is without charge. Subsequent changes by the Customer

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Residential Economy Service (cont.)

are subject to the applicable Service Order Charge as identified in this Tariff. If only one Calling Area Service offering is available for an Exchange, the Customer will automatically be classified under the available service offering and no charge will apply.

- D. Rates – The applicable rates for the Company’s Residential Economy Service are listed in Sections 4.4.B and 4.4.D of this Tariff.
- E. Lifeline – Company complies with all provisions set forth in Part 54 of the Rules of the Federal Communications Commission and shall offer all applicable State and Federal discounts to customers who have been properly certified as qualifying for Lifeline service pursuant to Part 54 of the Rules of the Federal Communications Commission.

4.4 Calling Area Rates and List of Exchanges

- A. List of Exchanges Where Flat-Rated Calling Applies

Home Exchange	Unlimited Flat-Rated Calling to the Following Exchanges
Buckfield	Buckfield, North Turner, Turner, Sumner, West Paris
Canton	Turner, North Turner, Buckfield, Sumner, Canton, West Paris
North Turner	North Turner, Turner, Buckfield, Sumner, Canton
Sumner	North Turner, Turner, Buckfield, Sumner, Canton, West Paris
Turner	Turner, North Turner, Buckfield
West Paris	West Paris, Buckfield, Sumner, Bryant Pond

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Residential Economy Service (cont.)

B. Monthly Rates for Unlimited Flat-Rated Calling

Home Exchange	Rate
Buckfield	\$11.85 Residential Economy
Canton	\$11.85 Residential Economy
North Turner	\$11.85 Residential Economy
Sumner	\$11.85 Residential Economy
Turner	\$11.85 Residential Economy
West Paris	\$11.85 Residential Economy

C. List of Exchanges Where Per-Minute Charges Apply

Home Exchange	Per-Minute Rated Calling to the Following Exchanges
Buckfield	Lewiston, Canton, Hebron, Norway
Canton	Dixfield, Livermore, Wilton
North Turner	West Paris, Lewiston, Livermore, Hebron, Greene, Leeds
Sumner	Bryant Pond, Dixfield
Turner	West Paris, Canton, Sumner, Lewiston, Hebron, Livermore, Greene, Leeds
West Paris	Canton, North Turner, Turner, Norway, Locke Mills, North Norway

- D. The per-minute rate for calls made from Customer's Home Exchange to the applicable Exchanges listed in Section 4.4.C above is \$0.05 per minute.

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Residential Premium Service

5.1 Eligibility

- A. Residential service rates shall apply if the service is primarily for domestic purposes and the telephone number associated with the service is not included in any form of advertising for any business purpose.
- B. Business rates shall apply for any service that does not qualify for residential service rates as set forth in Section 5.1.A. Customers to whom business rates apply are not eligible to take Residential Premium Service.

5.2 Definitions

- A. Basic Service Calling Area – (BSCA) is the local (non-interexchange) calling area of the “home exchange” of a customer of Oxford Telephone Company. The BSCA includes all exchanges that were in the BSCA prior to the amendments effective in December 2002 plus all exchanges that are contiguous to the home exchange that were not included prior to the December 2002 amendments. Within a BSCA, there may be Economy and Premium calling options with flat-rate and per-minute pricing as specified in the definitions of those options. For all options, the BSCA includes all of the exchanges that are included in the calling option with the largest flat-rate calling area.
- B. Home Exchange – is the Exchange of the Company where the Customer receives dial tone.
- C. Premium Calling Area is the Customer’s basic-service calling area that has a flat monthly rate for unlimited calling within the Customer’ Home Exchange and the list of Exchanges identified in connection with the particular Home Exchange in Section 5.4.A of this Tariff.
- D. Provider of last resort service – is a flat- rate service with voice grade access to the public switched telephone network; local usage within the basic service calling areas of incumbent local exchange carriers as of January 1, 2012; dual-tone multifrequency signaling or its functional equivalent; single-party service or its functional equivalent; access to emergency services; access to operator services; access to interexchange service; access to directory assistance; toll limitation for qualifying low-income customers; and the capacity to maintain uninterrupted voice service during a

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Residential Premium Service (cont.)

power failure, either through the incorporation into the network or network interface devices of suitable battery backup or through electric current. For purposes of this Schedule, all terms included within the definition of provider of last resort service have the same meanings as set forth in 35-A MRSA § 7201.

- E. Residential Premium Service – is provider of last resort service offered to residential customers on a retail basis with the Premium Service Area as the Customer's Basic Service Calling Area.

5.3 Regulations Concerning Residential Premium Service.

- A. Calls Outside the Premium Calling Area – Calls made from the Home Exchange to locations within the State of Maine, other than those listed in Section 5.4 are billed to the Customer at the applicable intrastate toll rates of the carrier used to provide Customer's intrastate toll service.
- B. Municipal Calling Service – Customer shall receive toll free calling to any other customer of a Provider of Last Resort within the municipality in which Customer resides where practicable so long as Customer is utilizing an intralata toll provider for whom Company provides billing to the Customer. In the event Customer is charged by an intralata toll provider for whom Company provides billing to the Customer for a call to a Provider of Last Resort customer within the municipality in which Customer resides, Company shall remove any charges associated with any such municipal calling from the customer's bill when notified by the customer.
- C. Changes in Calling Areas – The Customer's initial selection of either the Economy Calling Area Service offering or the Premium Calling Area Service offering is without charge. Subsequent changes by the Customer are subject to the applicable Service Order Charge as identified in this Tariff. If only one Calling Area Service offering is available for an Exchange, the Customer will automatically be classified under the available service offering and no charge will apply.

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Residential Premium Service (cont.)

- D. Rates – The applicable rates for the Company’s Residential Premium Service are listed in Section 5.4.B of this Tariff.
- E. Lifeline – Company complies with all provisions set forth in Part 54 of the Rules of the Federal Communications Commission and shall offer all applicable State and Federal discounts to customers who have been properly certified as qualifying for Lifeline service pursuant to Part 54 of the Rules of the Federal Communications Commission.

5.4 Calling Area Rates and List of Exchanges

- A. List of Exchanges Where Flat-Rated Calling Applies

Home Exchange	Unlimited Flat-Rated Calling to the Following Exchanges
Buckfield	Buckfield, Turner, North Turner, Sumner, Canton, West Paris, Lewiston, Hebron, Norway
Canton	Canton, Turner, North Turner, Buckfield, Sumner, West Paris, Dixfield, Livermore, Wilton
North Turner	North Turner, Turner, Buckfield, Sumner, Canton, West Paris, Lewiston, Livermore, Hebron, Greene, Leeds
Sumner	Sumner, Turner, North Turner, Buckfield, Canton, West Paris, Bryant Pond, Dixfield
Turner	Turner, North Turner, Buckfield, Sumner, Canton, West Paris, Lewiston, Livermore, Hebron, Greene, Leeds
West Paris	West Paris, Turner, North Turner, Buckfield, Sumner, Canton, Bryant Pond, Norway, North Norway, Locke Mills

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Residential Premium Service (cont.)

B. Monthly Rates for Unlimited Flat-Rated Calling

Home Exchange	Rate
Buckfield	\$16.89 Residential Premium
Canton	\$16.89 Residential Premium
North Turner	\$16.89 Residential Premium
Sumner	\$16.89 Residential Premium
Turner	\$16.89 Residential Premium
West Paris	\$16.89 Residential Premium

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OXFORD TELEPHONE COMPANY (SAC 100019)

ATTACHMENT - LINE 3017

ATTACHMENT REDACTED IN ENTIRETY